

Application for Employment

CONFIDENTIAL

Please ensure you complete all sections of this form in black ink and return to the Human Resources Officer.

Position applied for: _____

PERSONAL

Last Name: _____ (in Block Capitals)

First Name(s): _____ Title: _____ (Mr, Mrs, Miss, ...)

Address: _____

Town/City: _____ Post Code: _____

CONTACT DETAILS

Telephone No.(inc. Code) Day: _____ Evening: _____

Email: _____

Where did you see this vacancy advertised? _____

EMPLOYMENT EXPERIENCE

Present or most recent employer

Date		Name and address of employer	Job title and Duties of the job	Reason for leaving (If applicable)
From:	To:			

EMPLOYMENT HISTORY

Please list other posts held, starting with the most recent. It would be helpful to account for any “gaps” in you employment history. (Please continue on a separate sheet if necessary)

Date		Name and address of employer	Job title and Duties of the job	Reason for leaving (If applicable)
From:	To:			

EDUCATION AND QUALIFICATIONS

Establishment Name	From	To	Qualifications awarded	Result / Grade

MEMBERSHIP OF PROFESSIONAL BODIES / OCCUPATIONAL TRAINING

Membership of Professional Bodies	Date obtained / Grade
Please give detail of any occupational or other relevant training	Date of attendance

REFERENCES

Name:	Name:
Capacity in which known:	Capacity in which known:
Address:	Address:
Town/City:	Town/City:
Post Code:	Post Code:
Tel. No.	Tel. No.
Email:	Email:
Can we approach this referee prior to the interview:	Can we approach this referee prior to the interview:
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

GENERAL

Are you related or do you have any substantial connection with an employee of Erlson. Yes No

If yes, please give details:
(This information is required to avoid bias during the selection process)

Should you be selected for interview, please indicate dates when it would be impossible for you to attend.

Do you require a work permit to work in the UK Yes No

National Insurance Number (if applicable)

OTHER INFORMATION

Do you have any Criminal Convictions which are not spent? Yes No

If yes, please give details:

(Note: If this post requires a Criminal Records Bureau disclosure, all convictions (spent or otherwise) must be declared)

Do you have a disability? Yes No If yes, nature of disability:

If appointed, when could you start work?

Please sign and date this form – please type your signature if e-mailing (should you be interviewed you will be asked to sign this again then)

I agree that Erlson Precision Components Limited can process my application in accordance with the Data Act 2000.

I declare that the information I have given is, to the best of my knowledge and belief, true and complete.

Signature:

Date:

INFORMATION IN SUPPORT OF THIS APPLICATION

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Equal Opportunities Monitoring Questionnaire

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Erlson Precision Components Limited has a policy of equal opportunity. Applications are welcome from all sections of the community. The aim of the policy is to ensure that everyone who works or applies to work for the company is treated fairly and is not subject to unlawful discrimination on grounds of their sex, age, race, ethnic or national origins, colour, marital status, sexual orientation, religion or belief, family responsibility, disability, or political beliefs.

How can you help us

In order to monitor the effectiveness of our Equal Opportunities policy, we request that all applicants complete and return this Equal Opportunities monitoring form. This information will be treated as confidential and used only for monitoring purposes. It will not be divulged to any person or agency involved in the selection process.

Please sign below to indicate your agreement that the company may process the information provided by you and use it for monitoring purposes only.

Please return this form with the application form to the Human Resources Officer.

Signed: _____ Date: _____

Name: _____ Position Applied for: _____

(please tick appropriate box)

1. My Gender is: Female Male

2. Please tick the classification best describes your ethnic origin.

White	<input type="checkbox"/> British <input type="checkbox"/> Irish <input type="checkbox"/> Any other White background (please write below)
Mixed	<input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> White and Black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Any other Mixed background (please write below)
Asian or Asian British	<input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Any other Asian background (please write below)
Black or Black British	<input type="checkbox"/> Caribbean <input type="checkbox"/> African <input type="checkbox"/> Any other Black background (please write below)
Chinese or other Ethnic group	<input type="checkbox"/> Chinese <input type="checkbox"/> Any other background (please write below)

3. My age is between (please tick appropriate box)

- 16 – 19 20 – 29 30 - 39
 40 – 49 50 – 59 60 - 65

4. The Disability

5. Where did you learn of this vacancy?

Thank you for completing this questionnaire